

A. Organization & Contact Information

Case Id: 11153
Name: My FACE (Males and Females Acting in
Address: *No Address Assigned

Completed by dothula@gmail.com on 11/20/2020 12:04 PM

A. Organization & Contact Information

The Request for Proposals and additional materials to assist with completing the application can be found on the City's webpage for [Community Agencies](#)

A.1. Organization Name

My FACE (Males and Females Acting in Confidence and Empowerment)

EXECUTIVE DIRECTOR/MANAGER

A.12. Name, Title

Dothula Baron, President/Executive Director

A.2. Project/Program

MENTOR (Mentoring, Empowerment, Nurturing, Training, Opportunities, Responsibility)

A.13. Email

dothula@gmail.com

A.3. FY 2021-22 Funding Request Amount

\$30,000.00

A.14. Phone

(336) 331-3320

A.4. Agency's Total Operating Budget

\$80,000.00

CONTACT

A.15. Name, Title

Dothula Baron, President

A.5. Mailing Address

PO Box 773 Winston-Salem, NC 27102

A.16. Email

dothula@gmail.com

A.6. Project/Program Location Address

MENTOR/2021 S. Salem Bluff Drive, Winston-Salem, NC
Winston-Salem, NC 27127

A.17. Phone

(910) 795-6359

A.7. Organization Website

None

BOARD CHAIR

A.18. Name

Dothula Baron

A.8. Year 501(c)(3) status obtained

2015

A.19. Term Expiration

12/31/2020

A.9. Organization Fiscal Year

January-December

A.20. Email

dothula@gmail.com

A.10. Federal Tax ID Number

A.21. Phone

(910) 795-6359

A.11. Federal DUNS Number

B. Project Overview

Completed by dothula@gmail.com on 11/20/2020 12:05 PM

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B. Project Overview

Please provide the following information

APPROACH (7 POINTS)

B.1. Provide a concise description of the proposed project/program, indicating specifically how City funds will be used. Briefly, what are the goals/objectives of the project/program?

There is a continuing need for women and young African American men to realize their worth in order to realize opportunities available to them. Historically women and men of color have lagged behind the majority population, socially and economically, and thus have been generally powerless and disenfranchised. They have not been encouraged to be strong leaders. Once they know who they are, what they are, and why they're here, they are likely to soar! MY FACE makes that happen, and we hope to do that in Boston-Thurmond and in other similar neighborhoods in Winston-Salem/Forsyth County.

The goal of MENTOR is to empower families to compete in the marketplace, creating opportunities for improving their economic status. Objectives are for heads of household to: 1.) Identify and attain adequate education; 2.) Obtain sufficient employment; 3.) Improve ability to maintain household budgets; 4.) Secure basic needs; i.e. food, clothing, shelter; 5.) Attain proficiency in effective communication; 6.) Enhance personal leadership and empowerment skills; and 7.) Learn general computer skills for navigating through 21st century society and culture. MENTOR (Mentoring, Education, Nurturing, Training, Opportunities, and Responsibility) is a holistic program that provides mentors to unemployed/ underemployed families. In October 2019, we were mentoring 2 individuals, with four mentors, and now, in November 2020, have expanded to 20 individuals, with seven mentors. These mentors participate in intensive training in, not only mentoring, but also coaching, career development, leadership development, problem solving, goal setting, community resources and other needed tools for working with families. The uniqueness of MENTOR is that families are mentored one-on-one by members of their own neighborhoods. The President of My FACE has worked with many programs, focusing on women's issues, and presented workshops on life skills and personal development for varied audiences throughout the South.

Mentors assist female heads of household in writing Family Empowerment Plans (FEPs) and helping them follow through on those plans. We have established relationships with Boston-Thurmond Community Engagement Roundtable, Family Services, Forsyth Technical College, Goodwill, Habitat for Humanity, Salem Chapel, Social Services, and WS/FC Schools, among other community institutions, for helping family heads acquire tools for upward economic mobility. Additionally, MENTOR provides personal leadership and empowerment training on zoom in 1.) Loving the Woman Within; 2.) Building Effective Relationships (Communication/Conflict Resolution Skills); 3.) Job Readiness; and 4.) Problem/Solving/ Collaboration. More advanced training in Balancing Finances and Developing Computer Skills will also be provided by Financial Pathways and Forsyth County Public Library.

Funding from the City of Winston-Salem would specifically be used for: 1.) Small Stipends for Mentors; 3.) Training for Mentors and Mentees (heads of household); and 3.) Computers and incentives for encouraging mentees to participate in zoom/leadership classes.

B.2. How will a participant access the proposed project/program, use the services, and derive a beneficial outcome from participation?

Participants are accessing the project through Boston-Thurmond area schools--Paisley International Baccalaureate Magnet, Kimberley-Park, and Cook. Through our relationships with Family Services, Goodwill, Social Services, churches and other and other community agencies, we hope to attract additional participants. Mentors will go door-to-door to identify interested families and work one-on-one with families to help them develop Family Empowerment Plans. Mentors help families identify community resources for assisting them in implementing their plans. They work with them during their processes until they reach their goals. An added benefit this year is the zoom training from which participants learn leadership and personal development skills. Ultimately, heads of household will derive a beneficial outcome by improving their financial status and acquiring adequate, sufficient income for supporting their families comfortably.

B.3. Below, please provide anticipated service metrics into the appropriate fields.

Where applicable, applicants will be reimbursed funds based upon timely submissions of eligible invoices. These invoices should describe services rendered and should align with the goals and objectives cited here. Where outcomes do not align with goals, please be prepared to provide a written summary of shortcomings. If applicable and serving individual clients over a period of time.

Average Number of Participants Served at a Single Time

55

Maximum Number of Participants to Be Served at a Single Time

55

Unduplicated Total Number of Participants to Be Served During the Program Year

55

NEED (7 POINTS)

B.4. Describe the population(s) to be served. Describe the key demographic and economic characteristics of the clients to be served.

My FACE is proposing to identify, assist and provide mentoring and support to low to moderate income/unemployed and under-employed families in Boston-Thurmond and other underserved neighborhoods in Winston-Salem. Boston-Thurmond is a low to moderate-income community. Most are black, and a large number are below the poverty level. Additionally, significant numbers are single females with children, and only have a high school education or less.

This program has been designed to primarily assist females/single mothers who are low income. The administrators and providers for MENTOR are female, most of whom have been single mothers with higher education, yet they have experienced struggle and lack because of limited household incomes, associated with human service and social justice work. They are able to empathize and support the needs of our target population.

B.5. Describe the unmet need that the proposed project/program seeks to address. Why does the population described above need the proposed assistance? Include data supporting the need.

Historically women and men of color have lagged behind the majority population, socially and economically, and thus have been generally powerless and disenfranchised. They have not been encouraged to be strong leaders. Our vision is that all women and young men of color will be prepared to live and thrive abundantly, proficiently and effectively in the contemporary world. An unmet need in the Boston-Thurmond neighborhood is the large numbers of never-marrieds, many of whom are low income single mothers. According to Winston-Salem City-Data, the median household income is \$24,521, less than half the North Carolina rate; and approximately 60% have less than a high school education; approximately 60% of the total Boston-Thurmond population are black, almost 15% are white, and roughly 25% are Hispanic, black/white, and other; thirty-nine (39) per cent are below the poverty level. Another interesting point is that 38.7% are in service occupations, compared to 20.7% in the state, another indication of low incomes. Additionally, the percentage of never married females 15 years and older is 12.5%, while in North Carolina, it is 15.2%; plus the number of married couples is low (36.9%), compared to 57 state-wide. Academically, only 4% of the total residents in Boston-Thurmond were in undergraduate college in 2015. We want to raise this statistic.

This population needs the assistance, not only because many of them want to raise their standards of living, but also, because of the efforts to revitalize Boston-Thurmond physically with new housing and renovations. Subsequently, The Boston-Thurmond Community Engagement Roundtable is in the process of developing a revitalization plan focused on housing and beautification, and the Boston-Thurmond Neighborhood Association continues to primarily focus on safety. Habitat for Humanity has built many houses in an effort to transform the neighborhood. My FACE is focusing on assisting residents in upward academic and economic mobility to prepare families for the dramatic changes happening in their neighborhood. Most of our mentors are residents of Boston-Thurmond community and members of the Boston-Thurmond Neighborhood Association. Most are members of the Roundtable and are African-American.

We help families in the neighborhood elevate their skills in personal development and leadership, including communication, esteem-building, affirmation, responsibility, self-respect/honoring oneself, respect for others, acknowledging/encouraging other women, trust, relationship-building, team building and problem solving. MENTOR is addressing this need in Boston-Thurmond and in other similar neighborhoods in Winston-Salem, where low income, unemployed and underemployed families reside.

COLLABORATION (6 POINTS)

B.6. Describe any specific collaborative relationships with other organizations (public or private) and how they will impact the project/program. How will collaboration contribute to the planning, implementation, operation, oversight, and performance measurement of the proposed project/program?

Collaboration is in place with Family Services, Goodwill, M.L. King Community Center, NC Work Career Center, and Social Services. They all have educational and work programs in place that will benefit our families, and have agreed to work with us in our efforts. All of them, plus Winston-Salem/Forsyth County Schools have committed to send us referrals. Habitat for Humanity has agreed to talk to potential families who might be interested in and want affordable new homes, and Salem Chapel is also supportive. They both have provided us meeting space, when needed.

IDIS Setup

No data saved

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IDIS Setup

Please provide the following information

Project Name

National Objective

Activity Number ID

HUD Activity Code

Project Description

Accomplishment Type

Initial Application Date

Service Area

Ward

Census Tract(s)

Block/Group

MWBE

C. Strategy and Performance

Completed by dothula@gmail.com on 11/16/2020 9:02 PM

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C. Strategy and Performance

Please provide the following information

STRATEGY (5 POINTS)

C.1. The City of Winston-Salem adopted the [2017-2021 Strategic Plan \(2019 Update\)](#) as a guiding document to establish community priorities based on the vision, mission, and values set forward by the Mayor and City Council. Indicate which of the City's strategic focus areas your program aligns with best (select one):

Economic Vitality and Diversity

C.2. Select the service area(s) that your project/program relates to:

- Housing/Homelessness
- Economic Development
- Construction Rehabilitation
- Poverty Reduction
- Arts and Culture
- Youth
- Public Safety
- Transportation
- Other

PERFORMANCE (15 POINTS)

C.3. Explain the plan for monitoring and evaluating the project/program. Also include the steps that will be taken if the stated program goals provided in C.5. are not achieved.

Monitoring and evaluation will consist of:

Family Empowerment Plans (FEPs): Mentors brainstorm with heads of household/mentees to develop life goals and plans., which are reviewed frequently to determine where success are made and plans need to be altered.

Daily Logs: Mentors post on their log each time they make contact with heads of household/mentees or take action on their behalf. These activities are also viewed and taken in to account when reviewing Family Empowerment Plans (FEPs).

Mentor Evaluation Sheets : Mentors are evaluated on a regular basis to ensure they are fulfilling activities agreed upon in their Mentor agreements.

Printed By: Rene Williams on 12/12/2020

Quarterly Reports: Mentors complete Quarterly Reports based on items listed in their daily logs. This information helps to document project activities and gives us information to be used in grant applications and applications.

Annual Reports: Compilation of annual activities as reported in Quarterly Reports.

If original goals are not achieved, the Coordinator and Mentors, along with partners, will evaluate and plan strategies for moving forward. We will determine what elements will be deleted or modified and other elements that need to be added. Next steps will be decided. We are committed to our work with families in Boston-Thurmond and similar neighborhoods.

C.4. Describe the system to be used to track participant and program data. List any key reports and their frequency that will be used to capture project/program performance.

Monthly compilation of data, tracking reports will be turned in by Mentors. The Coordinator will conduct monthly data tracking, based on reports given by Mentors.

C.5. Use the chart below to show how your agency measures program effectiveness. List goals, activities, and performance measures you will use to evaluate services, facilities, and programs that will be funded by the City. Performance measures can be quantitative and/or narrative.

Applicants will be reimbursed funds based upon timely submissions of eligible invoices. These invoices should describe services rendered and should align with the goals and objectives cited here. Where outcomes do not align with goals, please be prepared to provide a written summary of shortcomings.

| Stated Program Goals | Program Activities in Support of Goals | FY 19-20 Previous Year Results | FY 20-21 Current Year Projected Results | FY 21-22 Next Year Anticipated Results |
|--|--|--|---|---|
| To enhance opportunities for improving the financial status of families in the Boston-Thurmond community | Mentors worked with families, providing budget counseling, educational guidance, motivation and employment assistance, where necessary | Worked with 20 families in completing Family Empowerment Plans and working towards results. Three heads of household enrolled in classes at FTCC; one took GED; another became employed with our assistance, plus assisted with filing for unemployment and developing | By June 30, 2021, we will have trained a total of 30 heads of household in budgeting. | By June 30, 2022, we will have trained a total of 50 heads of household in budgeting. |

| | | | | |
|--|---|--|--|---|
| | | resumes. | | |
| To increase opportunities for economic success of unemployed/underemployed families in Boston-Thurmond | Mentors worked with families, providing gentle guidance, direction, courage, and hope. Activities included: training mentors, selecting families, pairing mentors with families, assessing needs, setting up regular meetings, meeting with school personnel, reviewing family progress mid-term and at end of year | -Searched for and confirmed trainers for project mentors -Selected and trained nine mentors, and assigned seven mentors -Worked with 20 families, assisting them in developing Family Empowerment Plans and implementing them. | By June 30, 2021, we will have trained a total of 15 mentors (since our inception), mentored a total of 30 heads of household; assisted at least 30 families in either tasking the G.E.D., enrolling in adult high school classes, or enrolling in FTCC classes. | Mentors will have worked with 50 families in either completing high school classes and taking GED, enrolling in college classes, providing budget counseling, and preparing for job readiness, where necessary. |
| To empower heads of household for success in the community and the workplace | Mentors assisted family heads of household in determining and attaining leadership/empowerment skills | Mentors have demonstrated and exemplified leadership skills. | By June 30, 2021, thirty (30) family heads will have received certificates for participating in monthly leadership development classes. | By June 30, 2022, forty (40) family heads will have received certificates for participating in monthly leadership development classes. |

| | Total Unduplicated Number Served | Total Number Served |
|---|----------------------------------|---------------------|
| FY 19-20 Previous Year Results | 6 | 12 |
| FY 20-21 Current Year Projected Results | 55 | 385 |
| FY 21-22 Next Year Anticipated Results | 125 | 875 |

C.6. FY 19-20 Program Accomplishments

Accomplishments in 2019-20 were:

- Recruited Mentors
- Created MENTOR brochure and flyer
- Engaged Trainer(s)
- Developed training curriculum and materials

Printed By: Rene Williams on 12/12/2020

Designed Training Manual

Trained 5 mentors in 2019 and 4 mentors in 2020

Developed Family Process and Application, also Family Empowerment Worksheet, Plan and Commitment Form, plus other necessary materials

Met with community agencies, including Experiment in Self-Reliance, Family Services, Imprints Cares, Goodwill, NC Works Career Center, Salem Chapel, Social Services; engaged partners

Met with Parent Involvement Coordinators at Paisley, Cook, and Kimberley-Park

Met with WSFCS Parent Involvement Coordinator

Spoke to parents at Paisley Community Forum

Spoke to parents at Kimberley-Park Community Night

Developed Community Resource Manual

Assessed family needs during Covid-19

Distributed toiletry baskets, household cleaning supplies, gift cards for school clothing, and book bags with school supplies for all families

Provided beds and linens for a family devastated by water damage in children's rooms

Initiated leadership and personal development training

C.7. FY 21-22 Key Objectives

Key objectives for 2021-22 are:

Mentor 50 families to become strong, efficient contributors to society

Train at least 40 family heads of household

Train at least 10 new mentors

Ensure that all 40 family heads have completed Family Empowerment Plans and are working towards goals

Enroll family heads of household in education classes for either high school GED/graduation or college credits, where necessary

Train all families (50) in budgeting and financial literacy

Publish community resource manual; distribute to all families

Improve leadership/life skills for all families

Encourage some heads of household to help with training new family heads/mentees

D. Organizational Capacity

Completed by dothula@gmail.com on 11/20/2020 12:09 PM

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D. Organizational Capacity

Please provide the following information

MISSION (5 POINTS)

D.1. Provide an overview of the organization. Include the organization's mission statement and the major services, programs, and activities provided. How does the proposed project/program help advance the mission of your organization?

Purpose: MY FACE was formed to train women in personal development and leadership, including communication, esteem-building, personal affirmation, responsibility, self-respect/honoring oneself, respect for others, acknowledging/encouraging other women, trust, relationship-building, team building and problem solving. Other activities include Education and Employment; Economic Awareness and Financial Competency; Civic and Political Awareness; Sexual Aptitude and Personal Health; and Spiritual Awakening. In the past, MY FACE has sponsored classes/workshops in topics, such as Economics 101 – Banking/Savings and Beating the Winter Blues.

Mission: To improve and enhance the status and quality of life for women and young men of color

Vision: Historically women and men of color have lagged behind the majority population, socially and economically, and thus have been generally been powerless and disenfranchised. They have not been encouraged to be strong leaders. Our vision is that all women and young men of color will be prepared to live and thrive abundantly, proficiently and effectively in the contemporary world.

Programs:

Personal Awareness and Leadership Development – MY FACE trains women in personal development and leadership, including communication, esteem-building, personal affirmation, responsibility, self-respect/honoring oneself, respect for others, acknowledging/encouraging other women, trust, relationship-building, team building and problem solving.

Education and Employment – MY FACE staff and mentors provide support and assistance for women who want to enhance their skills and further their careers. Where necessary, staff and mentors assist them in identifying potential trade schools or colleges, preparing and submitting applications, obtaining financial assistance, and enrolling in their chosen institution. Additionally, MY FACE was with individuals to prepare resumes, learn interviewing skills, understand appropriate dress, the job search, networking, self-awareness/life skills, preparing for the future, strengths/weaknesses, thinking outside the box, and self-sufficiency, and other related skills.

Because needs of African American males are extensive, in the future MY FACE will also work with young African American males to assist them in staying focused during high school, graduating, applying for, and enrolling in higher education. During their college years, MY FACE staff and volunteers act as mentors to ensure that students stay on track, maintain appropriate grade point averages and have other necessary tools for achieving college graduation and transitioning into the working world, including college/career planning and college funding.

Economic Awareness and Financial Competency – MY FACE realizes that women often are not very well versed in economic awareness and financial competency. Our aim is to change that phenomenon. MY FACE conducts classes and workshops that will include What is Wealth?, Economics 101 – Banking/Savings, Mortgage Bundling, Consumerism, Insurance and investments, Credit and Credit Cards, Money Management, Financial Literacy, and Managing through Tough Times, among others. We call on financial counselors and other similar professionals to assist in this training.

MENTOR will help advance our organization because its activities are exactly why My FACE was established.

FUNCTION (5 POINTS)

D.2. How long has your organization been in operation?

We were incorporated in 2008, and received our tax exempt status in 2015

D.3. How does your organization benefit and serve the City of Winston-Salem and its citizens?

My FACE was originally established in Wilmington, NC to serve the state of North Carolina. We just recently became visible in Winston-Salem. The Founder and President has served the city of Winston-Salem for many years having grown up here and lived here for many years since, when she served as Co-Chairman of the Governor's Conference on Leadership Development for Women in the 1980s. She also volunteered quite abundantly at the YWCA, here she helped establish a project entitled Black Women Coping that served 75 women as part of their very first event. She was also head of Women in the Work Force in High Point. She moved away in 1990, and just recently returned in 2016.

STRUCTURE (5 POINTS)

D.4. In the chart below, list key personnel involved in the proposed project/program.

| Position Title | Activities/Inputs | Total Work Hours Per Week | % of hours proposed to be funded |
|---------------------|---|---------------------------|----------------------------------|
| Project Coordinator | Designs and facilitates key components of the project, manages the project and oversees the mentors' work with families | 40 | 0.00 % |
| Mentor Coordinator | Supervises and coordinates mentors in performing their tasks with families | 10 | 100.00 % |
| Mentors (15) | Works with families in determining and fulfilling goals | 8 | 100.00 % |
| Trainers (2) | Trains Mentors and devises working materials and guide books for Mentors | 8 | 100.00 % |

D.5. List all executive staff and their compensation (other than per diem).

| Executive Staff Name | Title/Role | Compensation | % of Hours Proposed to be Funded |
|----------------------|---------------------|--------------|----------------------------------|
| Dothula Baron | Project Coordinator | \$0.00 | 0.00 % |
| Delores Turner | Mentor Coordinator | \$24,600.00 | 100.00 % |

D.6. Attach an organizational chart

Organizational Chart *Required

MyFACE_OrgChart.docx

D.7. Please complete the Diversity of Employment and the Employment Profile below. See the [Request for Proposals \(RFP\)](#) for definitions of position types used in the Employment Profile.

Describe the hiring process and how it is structured to provide the most diverse candidate pool.

The hiring process includes 1.) Announcing jobs in the Boston-Thurmond neighborhood; 2.) Reviewing applications/resumes by Admin team; 3.) Using a score sheet to compare candidate qualifications; and 4.) hiring personnel.

Please enter the total number of Full-Time Positions and Employees you have in the table below

| | Male - White | Male - Black | Male - Other | Female - White | Female - Black | Female - Other |
|--------------------------|--------------|--------------|--------------|----------------|----------------|----------------|
| Executives/Managers | | | | | 1 | |
| Professionals | | | | | | |
| Technicians | | | | | | |
| Office/Clerical | | | | | | |
| Laborers/Service Workers | | | | | | |
| Total Full-Time | | | | | | |

Please enter the total number of Temporary/Part-Time Positions (FTE) and Employees you have in the table below

| | Male - White | Male - Black | Male - Other | Female - White | Female - Black | Female - Other |
|--------------------------|--------------|--------------|--------------|----------------|----------------|----------------|
| Executives/Managers | | | | | 1 | |
| Professionals | | | | 1 | 5 | |
| Technicians | | | | | | |
| Office/Clerical | | | | | | |
| Laborers/Service Workers | | | | | | |
| Total Part-Time/Temp | | | | | | |

D.8.

Attach a list of all Board Members AND compensation (other than per diem) *Required

MyFACE_BoardMembers2019.docx

D.9. Number of full Board meetings held during the last twelve months

2

D.10. Number of Board's Executive Committee meetings held during the last twelve months

1

ABILITY (5 POINTS)

D.11. Describe the implementation or operational plan to get the proposed project/program up and running in a timely manner. Describe any key contingencies on which the startup depends. Please upload any maps, milestones, etc. to "F. Required Documents."

Operational Plan:

1. Train new mentors no later than February 2021
4. Meet with school personnel and other community agencies (no later than January 2021)
5. Meet with new family heads of household (no later than April 2021)
6. Assist heads of household in creating Family Empowerment Plans (no later than June 2021)

D.12. How do your policies and procedures (including marketing, outreach, eligibility determination and appeals) ensure fair and equal access to the benefits of the program to all persons who seek to participate?

My FACE is currently working on a Policies and Procedures Manual to address marketing, outreach, eligibility, appeals, etc. Tentatively in draft status to show that My FACE generally supports fairness and equality in all its activities across the board, particularly in selection of vendors and contracts; i.e. insurance agents, accountants, consultants, etc.

E. Cost Effectiveness

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E. Cost Effectiveness

Please provide the following information

BUDGET AND FUNDING (10 POINTS)

E.1. Please complete the table to show the organization's operating budget.

| Expenditures by Program | Budgeted FY 20-21 | Projected Actuals FY 20-21 | Proposed Budget FY 21-22 |
|--------------------------------------|--------------------|----------------------------|--------------------------|
| Program Services | \$50,500.00 | \$5,480.00 | \$50,500.00 |
| Fundraising | \$0.00 | \$0.00 | \$0.00 |
| Management and General | \$29,500.00 | \$0.00 | \$29,500.00 |
| Total Expenditures by Program | \$80,000.00 | \$5,480.00 | \$80,000.00 |

| Expenditures by Category | Budgeted FY 20-21 | Projected Actuals FY 20-21 | Proposed Budget FY 21-22 |
|---|--------------------|----------------------------|--------------------------|
| Employee Salaries and Wages | \$24,600.00 | \$0.00 | \$24,600.00 |
| Employee Benefits | \$0.00 | \$0.00 | \$0.00 |
| Facility Rent and Utilities | \$3,600.00 | \$0.00 | \$3,600.00 |
| Training and Conference Registration | \$10,400.00 | \$0.00 | \$10,400.00 |
| Membership and Dues | \$0.00 | \$0.00 | \$0.00 |
| Travel and Transportation | \$1,200.00 | \$0.00 | \$1,200.00 |
| Grants to Individuals and Organizations | \$0.00 | \$4,000.00 | \$0.00 |
| Contracted Fundraising Services | \$0.00 | \$0.00 | \$0.00 |
| Goods Purchased for Resale | \$0.00 | \$0.00 | \$0.00 |
| Other Contracted Services | \$14,400.00 | \$1,375.00 | \$14,400.00 |
| Other Operating Expenditures | \$25,800.00 | \$105.00 | \$25,800.00 |
| Capital Outlay | \$0.00 | \$0.00 | \$0.00 |
| Total Expenditures by Category | \$80,000.00 | \$5,480.00 | \$80,000.00 |

| Revenues by Category | Budgeted FY 20-21 | Projected Actuals FY 20-21 | Proposed Budget FY 21-22 |
|-----------------------------------|-------------------|----------------------------|--------------------------|
| City of Winston-Salem | \$30,000.00 | \$0.00 | \$30,000.00 |
| Forsyth County | \$0.00 | \$0.00 | \$0.00 |
| State of North Carolina | \$0.00 | \$0.00 | \$0.00 |
| Federal Government | \$0.00 | \$1,000.00 | \$0.00 |
| Admissions/Program Revenues/Sales | \$0.00 | \$0.00 | \$0.00 |

| | | | |
|-----------------------------------|--------------------|-------------------|--------------------|
| Memberships | \$0.00 | \$0.00 | \$0.00 |
| Donations | \$0.00 | \$980.00 | \$3,000.00 |
| Foundation Grants | \$45,000.00 | \$3,500.00 | \$42,000.00 |
| Interest and Investment Income | \$0.00 | \$0.00 | \$0.00 |
| Parent Organization | \$0.00 | \$0.00 | \$0.00 |
| Other | \$5,000.00 | \$0.00 | \$5,000.00 |
| Total Revenues by Category | \$80,000.00 | \$5,480.00 | \$80,000.00 |

Describe any amounts listed under "Other Operating Expenditures" or "Other Revenues." Provide details on any specific federal government revenue sources.

Other = Supplies, Equipment, Printing, Incentives, Miscellaneous; Federal Government Revenue = SBA EIFL Grant

E.2. Has the City of Winston-Salem provided funding in the past? If so, provide a funding history of the most recent five years of City contributions in the table below.

| Year | Funding Source | Funding Amount |
|------|----------------|----------------|
| 2020 | N/A | \$0.00 |

E.3. Please complete the table below to show specific details of proposed City funding and other leveraged funding for the proposed project/program.

| Activity | Funding Requested from City | Funds from Other Sources | Other Funds Source |
|---------------------|-----------------------------|--------------------------|--------------------|
| Management | \$0.00 | \$24,600.00 | ZSR/WS Fdn |
| Mentor Training | \$10,400.00 | \$0.00 | 0.00 |
| Mentors Contracts | \$14,400.00 | \$0.00 | 0.00 |
| Supplies | \$0.00 | \$300.00 | ZSR |
| Equipment | \$0.00 | \$1,500.00 | ZSR |
| Marketing Materials | \$0.00 | \$4,000.00 | ZSR |
| Office Space | \$0.00 | \$3,600.00 | WS Fdn |
| Travel | \$0.00 | \$1,000.00 | WS Fdn |
| Incentives | \$5,200.00 | \$5,200.00 | 0.00 |
| Insurance | \$0.00 | \$1,000.00 | WS Fdn |
| Miscellaneous | \$0.00 | \$8,800.00 | ZSR |
| | \$30,000.00 | \$50,000.00 | |

E.4. For each activity and line item above, please provide a short but detailed description of how City resources will be used to carry out proposed programming.

City funding would help with training, mentoring, and incentives for heads of household/mentees. Training expenses include contracting with a qualified trainer for facilitating discussions and sharing expertise in listening/communications skills, coaching families in self-affirmation and esteem-building, and supporting them in developing problem solving skills. Our motto is hope, courage and transformation. Other training expenses would include materials and supplies for implementing the actual training process.

Mentoring activities include time spent with heads of household and their families to meet the plans determined in the Family Empowerment Plans and other related activities. Once training is completed, funding would be designated for time spent with each family. Mentors are trained to connect with their mentees at least once per week. They keep a daily log to document activities that would take place during their time on the phone, on zoom, or in person. They

will also document contact with other agencies that would provide specific support services, such as education, employment, health care, and transportation, just to mention a few.

Incentives are needs identified for each family, not just items to keep them interested but also materials and supplies needed to maintain healthy, wholesome families. With Covid 19, heads of household/mentees were asked to identify their needs. They mentioned toiletries, like shampoo and lotion. They mentioned cleaning products, such as detergent, soap, and bathroom cleaner. They mentioned back to school supplies and clothing. With one of the families, we helped them get beds and mattresses when the children's rooms were flooded during a heavy storm and these pieces had to be replaced.

MENTOR is a holistic project. Though we work hard to make sure that our clients are encouraged and motivated to get the education needed for upward economic mobility, we also support them in fulfilling other areas of need, i.e. physical, mental, emotional.

E.5. Where another stakeholder or agency is providing non-monetary assistance with a particular aspect of your programming, please provide a short description of those activities and how they will supplement the use of City funds.

Other stakeholders/agencies have been absolutely astounding in providing services, such as HOPE, Salem Chapel, and Habitat for Humanity in providing meeting space; Cook, Kimberley Park, and Paisley Schools Guidance Offices in sharing resources and contacts; Social Services in assisting with locating employment; Goodwill in giving general support, guidance and training; The Rescue Mission that has given discounts on specific items we have needed for helping families; Green Nest, another local nonprofit, that has helped in giving furniture; Mattie Peebles, a local volunteer, who has supplied food, clothing, and furniture; and many other individuals who have shared their funds and other resources in helping MENTOR to help families in need. These stakeholders/agencies in no way perform the same services that city funding would provide but certainly supplement the use of city funds and help us to do a better job.

E.6. If this year's request is different in any way (amount, activities, etc.) from a prior year's request, explain how and why. If you are a new applicant, please describe how you would adjust your project/program if your funding request is not funded at the full amount.

If My FACE receives less than we request, then we will have to go elsewhere for additional funding. We have operated thus far on minimal income, and have received lots of additional volunteer support and in-kind donations, but eventually will have to cover at least some of these expenses; i.e. mentors, supplies, equipment, and printing. We have a team of dedicated staff, so the goals and objectives will probably not be affected. It would be much easier with City funding.

SUSTAINABILITY (7 POINTS)

E.7. Describe the plan to sustain the project/program funding in future years. Include information about other funding sources to leverage City funds requested.

The project will be sustained through foundation and corporate funding, plus special events and donations. We have commitment from strong interest from the Winston-Salem Foundation and the Women's Fund. Within the next few years, we will approach United Way. Though we do not have fundraising expenses included in our budget, we understand the need to be steadfast in acquiring funds and planning for the future of MyFACE.

BARRIERS (3 POINTS)

E.8. Describe any potential programmatic barriers to project implementation (e.g. recruitment or outreach challenges, etc.) and your plans for overcoming them.

At this point, our biggest programmatic barrier is receiving support from schools and other agencies who make referrals. Since we are a relatively new service, we will have to continually communicate and educate them and the public on our capability and efficiency. That will come with time.

E.9. Describe any institutional barriers to project implementation (e.g. staff vacancies, pending departures, etc.) and your plans for overcoming them.

At this point, our biggest institutional barrier is funding. We need funding to compensate the mentors and to hire staff for ensuring that the work is done. Right now the President/Executive Director is doing a lot of the work with the assistance of volunteers who help with planning and supervision. Of course, it's difficult to hold volunteers accountable. Funding to compensate them would help tremendously.

AVERAGE COST (5 POINTS)

E.10. Use the table below to show the average amount of City funds requested per beneficiary to be served during the year and the average total cost of the service per beneficiary to be served during the year (including all funding sources)

| | |
|--|---------|
| Proposed funds from the City for this project: | 30000 |
| Number proposed to be served for the year: | 55 |
| Average City funds per beneficiary: | 545.45 |
| Proposed funds from all sources: | 80000 |
| Number proposed to be served for the year: | 55 |
| Average total funds per beneficiary: | 1454.54 |

F. Required Documents

Completed by dothula@gmail.com on 11/20/2020 1:00 PM

Case Id: 11153

Name: My FACE (Males and Females Acting in

Address: *No Address Assigned

F. Required Documents

Please provide the following information

Documentation

- Code of Conduct/Conflict of Interest Policy *Required**
MYFACE_ConflictOfInterest_e-signed.doc

- Submit a copy of the agency's latest 990 Form as submitted to the Internal Revenue Service. *Required**
IRS_990N_2019.pdf

- Organization By-Laws *Required**
MyFACE_bylaws.doc

- Articles of Incorporation *Required**
MyFACE_Articles of Incorporation_Certificate.jpg
My FACE_ArticlesofIncorporation_2008.pdf
MyFACE_ArticlesofAmendment_Additional Provisions.docx

- Organization Policies (including personnel, formal non-discrimination, procurement, accounting, etc) *Required**
My FACE_Financial Procedures.docx

- IRS 501(c)3 Designation Letter *Required**
MyFACE, IRS_ExemptLetter,p1.jpg
MyFACE, IRS_ExemptLetter,p2.jpg

Audited financial statements or a third-party review *Required

MyFACE_Audit Letter.docx

North Carolina Secretary of State - Current and Active Status (<https://www.sosnc.gov/search/index/corp>)

***Required**

NCNonprofitStatus.pdf

Other

MY FACE Brochure.pdf

Mentor Brochure.pdf

G. Income Based Projects/Services Only

Case Id: 11153
Name: My FACE (Males and Females Acting in
Address: *No Address Assigned

Completed by dothula@gmail.com on 11/20/2020 1:03 PM

G. Income Based Projects/Services Only

** Complete this section only if you are requesting funds for a Community Development project (for CDBG, HOME and/or ESG funding).**

If the section is not applicable to your project, please leave the questions blank and mark the step "Complete."

G.1. In the right-hand column below, indicate the number of participants to be served by the proposed project/program within each income category during the year. Click [here](#) to see Winston-Salem income limits by household size.

| Income Range | # to be served |
|----------------------------|----------------|
| 0 to 30% of median | 0 |
| 31% to 50% of median | 0 |
| 51% to 80% of median | 0 |
| Greater than 80% of median | 0 |

G.2. Describe policies, procedures, and criteria for determining who is eligible. Describe the procedures for screening, eligibility determination, intake, assessment and orientation of participants

H. Construction/Rehab Only

Completed by dothula@gmail.com on 11/20/2020 1:03 PM

Case Id: 11153

Name: My FACE (Males and Females Acting in

Address: *No Address Assigned

H. Construction/Rehab Only

** Complete this section only if you are requesting funds for a Housing Construction or Rehabilitation project.**
If the section is not applicable to your project, please leave the questions blank and mark the step "Complete."

H.1. Describe the proposed project, including any plans. If the project is approved, we will need a detailed work write-up.

H.2. Provide a projected timeline for the proposed work.

H.3. Describe how the project will be managed, including the contractor procurement process.

H.4. Describe the target market, including any special populations to be served.

H.5. Describe the services or program you plan to provide.

H.6. Describe the property management plan.

H.7. List the development team members.

H.8. Describe the financial capability of the sponsor/owner organization, including submission of the organization's operating budgets, agency audits, and Form 990s for the prior three years, unless already submitted to the City.

H.9. Listing of projects undertaken by principals over the past ten years, identifying project name and address, type of project, and number of units; please note any projects for which local government funding was received.

| Project Name | Address | Type of Project | No. Units | Govmt Funding |
|--------------|---------|-----------------|-----------|---------------|
|--------------|---------|-----------------|-----------|---------------|

Documentation

Market study or other analysis to verify the need for the project.

***No files uploaded*

Development costs that include a detailed sources and uses statement of all funds, including the requested loan from the City, in electronic format, preferably a spreadsheet.

***No files uploaded*

Operating pro forma that includes rent and operating cost assumptions and all estimated loan payments, in electronic format.

***No files uploaded*

Operating Budget

***No files uploaded*

Form 990

***No files uploaded*

I. Emergency Shelter Only

Completed by dothula@gmail.com on 11/20/2020 1:03 PM

Case Id: 11153

Name: My FACE (Males and Females Acting in

Address: *No Address Assigned

I. Emergency Shelter Only

** Complete this section only if you are requesting funds for an Emergency Shelter project.**

If the section is not applicable to your project, please leave the questions blank and mark the step "Complete."

Prior to the beginning of any funding year, any ESG-funded program must participate in the local Homeless Management Information System (HMIS) designated by the Winston-Salem/Forsyth County Continuum of Care, or for domestic violence programs, a comparable database in accordance with HUD's standards.

Emergency Shelter: Essential Services

| Activity | Total Budget (\$) |
|---|-------------------|
| Case Management | \$0.00 |
| Child Care | \$0.00 |
| Education Services | \$0.00 |
| Employment Assistance | \$0.00 |
| Job Training | \$0.00 |
| Outpatient Health Services | \$0.00 |
| Transportation | \$0.00 |
| Legal Services | \$0.00 |
| Services to Special Population | \$0.00 |
| Overhead Costs (limited to 15% of total activity request) | \$0.00 |
| | \$0.00 |

Emergency Shelter: Operating Costs

| Activity | Total Budget (\$) |
|---|-------------------|
| Rent | \$0.00 |
| Shelter Security | \$0.00 |
| Fuel | \$0.00 |
| Equipment | \$0.00 |
| Insurance | \$0.00 |
| Utilities | \$0.00 |
| Food | \$0.00 |
| Furnishings (limited to less than \$500 per item) | \$0.00 |
| Supplies | \$0.00 |
| Maintenance or Minor Repairs | \$0.00 |
| Overhead Costs (limited to 15% of total activity request) | \$0.00 |
| | \$0.00 |

J. Rapid Rehousing and HMIS Only

Completed by dothula@gmail.com on 11/20/2020 1:04 PM

Case Id: 11153

Name: My FACE (Males and Females Acting in

Address: *No Address Assigned

J. Rapid Rehousing and HMIS Only

** Complete this section only if you are requesting funds for a Rapid Rehousing project.**

If the section is not applicable to your project, please leave the questions blank and mark the step "Complete."

Prior to the beginning of any funding year, any ESG-funded program must participate in the local Homeless Management Information System (HMIS) designated by the Winston-Salem/Forsyth County Continuum of Care, or for domestic violence programs, a comparable database in accordance with HUD's standards.

Rapid Rehousing Financial Assistance

| Activity | Total Budget (\$) |
|---|-------------------|
| Rent Assistance | \$0.00 |
| Rental Application Fees | \$0.00 |
| Security Deposits | \$0.00 |
| Last Month's Rent | \$0.00 |
| Utility Deposits | \$0.00 |
| Utility Payments | \$0.00 |
| Moving Cost Assistance | \$0.00 |
| Overhead Costs (limited to 15% of total activity request) | \$0.00 |

Rapid Rehousing Services

| Activity | Total Budget (\$) |
|---|-------------------|
| Case Management | \$0.00 |
| Housing Search and Placement | \$0.00 |
| Mediation | \$0.00 |
| Legal Services | \$0.00 |
| Credit Repair | \$0.00 |
| Counseling | \$0.00 |
| Information and Referral | \$0.00 |
| Monitoring/Evaluation of Progress | \$0.00 |
| Overhead Costs (limited to 15% of total activity request) | \$0.00 |

HMIS/Data Collection Budget

| HMIS Activity | City ESG Request | State ESG Request |
|---------------|------------------|-------------------|
| Staff Costs | \$0.00 | \$0.00 |
| Equipment | \$0.00 | \$0.00 |
| User Fees | \$0.00 | \$0.00 |
| | \$0.00 | \$0.00 |

Submit

Completed by dothula@gmail.com on 11/20/2020 1:14 PM

Case Id: 11153

Name: My FACE (Males and Females Acting in

Address: *No Address Assigned

Submit

I certify that the applicant meets the conditions specified in the application instructions and will be able to carry out the proposed services in concert with these conditions. I also certify that the organization is a certified IRS 501(c)(3) non-profit organization.

Dothula Baron

Electronically signed by dothula@gmail.com on 11/20/2020 1:14 PM